## Foster Family Home - Corrective Action Report

Provider ID:

1-559156

Home Name:

Vilma Rabena, CNA

Review ID:

1-559156-5

91-933 Ahona Street

Reviewer:

Sue Lo

Ewa Beach

HI

96706

Begin Date:

7/5/2017

End Date:

7/9/2017

**Foster Family Home** 

**Required Certificate** 

[17-1454-6]

6.(d)(1)

Comply with all applicable requirements in this chapter; and

Comment:

6 (d)(1) Requirements at the time of the home visit made on 7/5/2017. No corrective action required. Home is eligible for a 2 year 3-bed certification.

Compliance Manager

Primary Care Giver

Date

7-5-2017

Date